## **Application Data Sheet**

Application Information Application Type::	Regula	ır	
Subject Matter::	Utility		
Suggested Classification::			
Suggested Group Art Unit::			
CD-ROM or CD-R?::	None		
Title::	Tissue	Distracti	on Device
Request for Early Publication	ı?::	No	
Request for Non-Publication	?::	No	
Suggested Drawing Figure::	7		
Total Drawing Sheets::	15		
Small Entity::		yes	
Petition included?::		No	
Secrecy Order in Parent Appl	?::	No	·
Applicant Information			
Applicant Authority type::		I	nventor
Primary Citizenship Country:		US	
Status::	Full Capacity		
Given Name:	Spanky A.		
Family Name::	Raymond		
City of Residence::	Uniontown		
State or Province of Residence	e::	ОН	

Country of Residence::

US

Street of mailing address::

2513 Greenview Drive

City of mailing address::

Uniontown

State or Province of mailing address::

OH

Postal or Zip Code of mailing address::

44685

**Applicant Information** 

Applicant Authority type::

Inventor

Primary Citizenship Country:

US

Status::

Full Capacity

Given Name:

Frank S.

Family Name::

Bono

City of Residence::

Newton

State or Province of Residence::

CT

Country of Residence::

US

Street of mailing address::

7 River Run Rd.

City of mailing address::

Newton

State or Province of mailing address::

CT

Postal or Zip Code of mailing address::

06470

**Applicant Information** 

Applicant Authority type::

Inventor

Primary Citizenship Country:

US

Status::

Full Capacity

Given Name:

Thomas G.

Family Name::

Wilson

City of Residence::

Guilford

State or Province of Residence::

CT

Country of Residence::

US

Street of mailing address::

24 Overlook Ln.

City of mailing address::

Guilford

State or Province of mailing address::

CT

Postal or Zip Code of mailing address::

06437

**Applicant Information** 

Applicant Authority type::

Inventor

Primary Citizenship Country:

US

Status::

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Given Name:

Joseph

Family Name::

Logan

City of Residence::

Trumbull

State or Province of Residence::

CT

Country of Residence::

US

Street of mailing address::

10 Mallett Dr.

City of mailing address::

Trumbull

State or Province of mailing address::

CT

Postal or Zip Code of mailing address::

06611

**Applicant Information** 

Applicant Authority type::

Inventor

Primary Citizenship Country:

US

Status::

Full Capacity

Given Name:

Steven J.

Family Name::

Wysocki

City of Residence::

Stratford

State or Province of Residence::

СТ

Country of Residence::

US

Street of mailing address::

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City of mailing address::

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State or Province of mailing address::

CT

Postal or Zip Code of mailing address::

06611

## **Correspondence Information**

Correspondence Customer Number:: 28078

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State or Province of mailing address::

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Country of mailing address::

US

Postal or Zip Code of mailing address::

46204-5115

Phone number::

317-638-2922

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317-638-2139

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mdbeck@maginot.com

## Representative Information

Representative Customer Number:	
	28078
	26076

## **Domestic Priority Information**

Application::	Continuity Type:	Parent Application::	Parent Filing Date::
	An application claiming the benefit under 35 USC 119(e)	60/459,036	March 31, 2003